

U.S. Department of Justice  
United States Marshals Service

# PROCESS RECEIPT AND RETURN

See instructions for "Service of Process by U.S. Marshal"

PLAINTIFF UNITED STATES OF AMERICA		COURT CASE NUMBER 98-CV-2411(GG)	
DEFENDANT ANA M. PARIS-AYALA		TYPE OF PROCESS ORDER (dated February 5, 2004)	
SERVE AT	NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC. TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN		
	Ana M. Paris-Ayala		
	ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code) HC-01, Bo. Torrecilla Baja, Loiza, PR 00772-9743		
SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW		Number of process to be served with this Form 285	1
H.S. GARCIA United States Attorney 350 Chardon Street, Suite 1201 San Juan, Puerto Rico 00918 FLU/VD (787)766-5656 Attn: Rebecca Vargas-Vera. AUSA		Number of parties to be served in this case	1
		Check for service on U.S.A.	

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available for Service):

Fold

ORDER MUST BE SERVED PERSONALLY TO ANA M. PARIS-AYALA.  
CONTEMPT HEARING IS SET FOR MARCH 9, 2004 AT 3:00 PM  
EMPLOYER'S ADDRESS: POLICIA MONTADA PINONES, (TEL. 791-1217)

\* 4 AM 10 12 PM  
8 AM S.

Signature of Attorney other Originator requesting service on behalf of:

☒ PLAINTIFF  
☐ DEFENDANT

TELEPHONE NUMBER

DATE

(787)766-5656

2.25.04

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY-- DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated. (Sign only for USM 285 if more than one USM 285 is submitted)	Total Process 1	District of Origin No. 69	District to Serve No. 69	Signature of Authorizing USMS Deputy or Clerk <i>[Signature]</i>	Date 3-2-04
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I hereby certify and return that I ☒ have personally served, ☐ have legal evidence of service, ☐ have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above on the on the individual, company, corporation, etc. shown at the address inserted below.

☐ I hereby certify and return that I am unable to locate the individual, company, corporation, etc. named above (See remarks below)

Name and title of individual served (if not shown above)

☐ A person of suitable age and discretion then residing in defendant's usual place of abode

Address (complete only different than shown above)

Policia Montada Pinones

Date  
03/04/2004  
Time  
10:00  
☒ am  
☐ pm

Signature of U.S. Marshal or Deputy

*[Signature]*

Service Fee \$40.00	Total Mileage Charges including endeavors \$7.30	Forwarding Fee \$	Total Charges \$47.30	Advance Deposits	Amount owed to U.S. Marshal* or (Amount of Refund*)
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REMARKS: 1st edict not at work but is there from during workdays 4 AM - 12 PM

PRIOR EDITIONS  
MAY BE USED

PRINT 5 COPIES:

1. CLERK OF THE COURT
2. USMS RECORD
3. NOTICE OF SERVICE
4. BILLING STATEMENT\*: To be returned to the U.S. Marshal with payment, if any amount is owed. Please remit promptly payable to U.S. Marshal.
5. ACKNOWLEDGMENT OF RECEIPT

FORM USM-285  
Rev. 12/15/80  
Automated 01/00